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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052 2008

| Ī | or ca | lendar | year 2008, d | or tax year begi | inning | | , 2008 | , and end | ing | | | , | 20 |
|------------|---|----------------------|---------------------------------------|---|---------------------------------------|---------------------------------------|----------------|-----------------|------|-------------|----------------|--------------------------------------|---|
| Č | 3 Che | ck all th | nat apply | Initial retur | 'n | Final return | Amended | return | Α | ddress | change | Name | change |
| - | | ſ | Name of fou | ndation | | | | | - 1 | A Emplo | yer identifi | cation number | |
| | Use ti | he IRS | | | | | | | 1 | | | | |
| 50 | lat | | SEVEN WO | ODS FOUNDA | מסדיד | | | | | | 91- | 1585493 | |
| Š, | Other | l asiw | | | | mail is not delivered to stree | t address) | Room/st | uite | B Telepho | | page 10 of the instruction | ns) |
| | ∰ pr | int | | | | | · | | ļ. | | | | |
| MAARK | or t | ype | 2260 000 | CONTRACTOR | टक ट्रा | TTME 220 | | | | | 142 | 5) 222-352 | 20 |
| × ! | -See S | pecific | | STNUT STRE | | JITE 330 | | | | C If exer | nption applica | tion is | <u> </u> |
| ∑ ′ | Thstru | ctions. | City of town, | State, and Zir Co. | 46 | | | | | • | g, check here | | |
| 7 | | l | | | | 0.400 | | | | | | ions, check here | |
| \geq | | | | CISCO, CA | | | | | | | | tions meeting the iere and attach | |
| 것 | | | - | | | c)(3) exempt private | | | | com | putation . | | ▶□ |
| N | | | | nexempt charitable | | Other taxable p | | | — ı | E If priva | ate foundation | n status was terminate | ا ل |
| 4 | Fair | market | value of all | assets at end | | unting method X C | ash Acc | rual | ŀ | under | section 507(b |)(1)(A), check here . | ▶ |
| 2 | of y | ear (fron | n Part II, col | (c), line | | her (specify) | | - - | | F If the I | oundation is | ın a 60-month termina | tion |
| = | 16) | ▶ \$ | 30 | 7,342. | (Part I, | column (d) must be or | r cash basis) | | | under | section 507(b) | (1)(B), check here | |
| | Part l | | | nue and Expens | | (a) Revenue and | (b) Net inve | etment | (c) |) Adjust | ed net | (d) Disburser for charita | |
| | | total of | amounts in co | olumns (b), (c), and equal the amounts | d (d) | èxpenses per | incom | | (0, | incon | | purpose | |
| | | column | i (a) (see pagi | e 11 of the instruct | ions)) | books | | | | | | (cash basis | |
| - | 1 | Contribution | ons. aifts. grants. | etc , received (attach sch | nedule) . | 25,000. | | | | | | | |
| | 2 | Check - | X if the fo | oundation is not requ | ured to | | | | | | | | |
| | 3 | | | temporary cash inves | | 7,054. | | 7,054. | | | | STI | MT 1 |
| | 4 | | | st from securities | | | | | - | | | | |
| | | | | | [| | | | | | | | |
| | 5 a | | | | 1 | | | | | | | | |
| | b | | · · | ss) | | 95,819. | | | | ···· | | | |
| Revenue | 6 a | Net gain Gross sa | or (loss) from s les price for all | sale of assets not on | | 33,013. | | | | | | | |
| 4 | <u>i</u> | assets or | | 7,453 | r | | | 5,819. | | | | | |
| B | 7 | | _ | me (from Part IV, I | I | | ļ <u>.</u> | 3,019. | | | RE | OF IVE | |
| _ | 8 | | | ıl gaın | | | | | | | | FEIVED | |
| | 9 | | modifications es less returns | | | | | | | 19 | | | 701 |
| _ | 1 | and allow | ances · · · | . | | | | | | 19 | APR | 2 6 2010 | 8 |
| วกรก | ь | | st of goods sold | | | | | | | - - | | P O WOIN | 8 |
| | 1 5 | Gross p | rofit or (loss) | (attach schedule) | | | | | | - parameter | A Market | | <u> </u> |
| Q (| 1 | Other in | icome (attach | schedule) | | | | | | | ACIT | | |
| 6 | 112 | Total. A | dd lines 1 thr | ough 11 | | 127,873. | | 2,873. | | | | | |
| 8 | 13 | Compens | sation of officer | s, directors, trustees, | etc | NONE | ļ | | | | | | |
| ⋖ | 14 | Other e | mployee salaı | ries and wages . | [| | | | | | | | |
| Cg. | 15 | Pension | plans, emplo | yee benefits | [| | | | | | | | |
| ٤ | 15 16a b c 17 18 19 20 21 22 | | | nedule) | | | | | | | | | |
| 3 | Ь | | | ach schedule) | | | | | | | | | |
| | c | | | es (attach schedul | | | | | | | | | |
| | 17 | • | | | | | | | | | | | |
| str | 18 | | | (see page 14 of the inst | | 2,057. | | | | | | | |
| Ē | 10 | • | • | schedule) and de | [| | | | | | | | |
| Ε | 20 | • | - | | | | | | | | | | |
| Ā | 24 | • | • | and meetings | i i | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| pu | 21 | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| 2 | 22 | - | • | ions | | 45. | | 45. | | | | | |
| Operating | 23 | | | ch schedule) STM | | | | | | | | | |
| era | 24 | • | _ | administrative ex | | 2 102 | | 45. | | | | | |
| aC | - | | _ | 23 | | 2,102. | <u> </u> | 43. | | | | E 1 | 5,500. |
| _ | 25 | | | grants paid | | 55,500. | | 4 F | | | | | 5,500. |
| _ | 26 | | | sements Add lines 24 | 4 and 25 | 57,602. | | _45. | | | | <u>5;</u> | <u>, , , , , , , , , , , , , , , , , , , </u> |
| | 27 | | t line 26 from | | 1 | | | | | | | | |
| | | | | enses and disburseme | · · · · · · · · · · · · · · · · · · · | 70,271. | | | | | | | |
| | | | | me (if negative, en | F | | 10 | 2 , 828. | | | | | |
| | - | Adjuste | d net income | (if negative, enter | -0-). | | 1 | | | | -0- | L | |

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 237,071. 2 Enter amount from Part I, line 27a 2 70,271. 3 Other increases not included in line 2 (itemize) ▶_____ 3 Add lines 1, 2, and 3 307,342. 4 5 Decreases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 307,342.

237,071

307,342

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| Part IV Capital Gain | s and Losses for Tax on In | vestment Income | | | |
|---|--|---|--|---|----------------------------------|
| (a) List ar | nd describe the kind(s) of property sold | (e g., real estate, | (b) How acquired P-Purchase | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo , day, yr) |
| | | | D-Donation | , , , , , , , , | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | | |
| a | | | | | |
| b | | | | | |
| C | <u> </u> | | | | |
| d | | | l | | |
| e | | | | | |
| Complete only for assets s | howing gain in column (h) and ow | ned by the foundation on 12/31/69 | (1) | Gains (Col (h) g | ain mınus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | (k), but not less t | han -0-) or |
| a | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| | () | f gain, also enter in Part I, line 7 | | | |
| 2 Capital gain net income or | | | 2 | | 95,819. |
| Net short-term capital gair | n or (loss) as defined in sections 1 | 222(5) and (6) | | | |
| If gain, also enter in Part I, | line 8, column (c) (see pages 13 | and 17 of the instructions). | 1 1 | | |
| | | | 3 | | |
| (a) List and describe the kind(s) of properly sold (e.g., real estable, 2-bell properly were received, server house, or common stock, 200 shs MLC Co.) SEE PART IV SCHEDULE (e) Gross sales price (f) Capreciation allowed (or allowable) (g) Cest or other basis (h) Cam or (loss) (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (or plus (f) menus (g)) complete only for assets showing gain in column (h) and owned by the foundation an 12/31/89 (i) Gains (cdi (h) gain minus (g)) complete only for assets showing gain in column (h) and owned by the foundation and 12/31/89 (ii) Gains (cdi (h) gain minus (g)) complete only for assets showing gain in column (h) and owned by the foundation and 12/31/89 (ii) Gains (cdi (h) gain minus (g)) complete only for assets showing gain in column (h) and owned by the foundation and 12/31/89 (ii) Gains (cdi (h) gain minus (g)) complete only for assets showing gain in column (h) and owned by the foundation and 12/31/89 (ii) Gains (cdi (h) gain minus (g) (ii) Gains (cdi (h) gain minus (g) (ii) Gains (cdi (h) gains (cdi | | | | | |
| | | | ase period | ı? | Yes X No |
| | | | | | |
| | ount in each column for each yea | r, see page 18 of the instructions be | etore mak | | |
| | , , | | | Distribution ra | |
| 2007 | 154,850. | 197,629. | | | 0.783539 |
| 2006 | 37,000. | 240,980. | | | |
| 2005 | 28,757. | 190,356. | | | 0.151070 |
| 2004 | 47,850. | 169,861. | | | 0.281701 |
| 2003 | 41,535. | 282,948. | | | 0.146794 |
| | | | | | |
| Total of line 1, column (d) | | | 2 | | 1.516644 |
| Average distribution ratio | for the 5-year base period - divid | e the total on line 2 by 5, or by the | | | |
| number of years the found | dation has been in existence if les | s than 5 years | 3 | | 0.303329 |
| | | | } | | |
| Enter the net value of non | charitable-use assets for 2008 fro | om Part X, line 5 | 4 | | 365,831. |
| Multiply line 4 by line 3 . | | | 5 | | 110,967. |
| Enter 1% of net investmen | nt income (1% of Part I, line 27b) | | 6 | | 1,028. |
| Add lines 5 and 6 | | | 7 | | 111,995. |
| Enter qualifying distribution If line 8 is equal to or graph the Part VI instructions on | ns from Part XII, line 4 | x in Part VI, line 1b, and complet | 8 e that pa | rt using a 1% | 55,500. tax rate. See |
| SA SA | | | | Ear- (| 990-PF (2008) |

| Form | 990-RF (2008) · . 91-1585493 | | | F | Page 4 |
|------|--|--------------|--------|-----|------------|
| _ | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | page 18 of t | he ins | | |
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | | | | |
| | Date of ruling letter (attach copy of ruling letter if necessary - see instructions) | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | 1 | | 2, | 057 |
| | here and enter 1% of Part i, line 27b | | | | - |
| c | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 2 | | | |
| 3 | Add lines 1 and 2 | 3 | | 2, | 057 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | NON |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | 2, | 057 |
| 6 | Credits/Payments | | | | |
| а | 2008 estimated tax payments and 2007 overpayment credited to 2008 6a 7,954. | | | | |
| b | TO A CONTRACTOR OF THE PROPERTY OF THE PROPERT | | | | |
| С | NONE | 1 | | | |
| d | _ · | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | 7 | | 7, | 954 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here | 8 | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | 5, | 897 |
| 11 | Enter the amount of line 10 to be Credited to 2009 estimated tax ▶ 5,897. Refunded ▶ | | | | |
| Pa | t VII-A Statements Regarding Activities | | | | |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if | : | | Yes | No |
| | participate or intervene in any political campaign? | | 1a | | Х |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 | | | j | |
| | of the instructions for definition)? | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | |
| С | D. L. C. C. Later St. F 4400 BOL for the year | | 1 c | N | /A |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | |
| | (1) On the foundation >\$ NONE (2) On foundation managers >\$ NON | <u>E</u> _ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed o | | | | |
| | foundation managers > \$ NONE | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | X |
| | If "Yes," attach a detailed description of the activities | | | - | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | of | į | | |
| | the state of | | 3_ | | X |
| 4 a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | | 4b | N | / <u>A</u> |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | X |
| - | If "Yes," attach the statement required by General Instruction T. | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | | |
| • | By language in the governing instrument, or | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions | that | | | |
| | conflict with the state law remain in the governing instrument? | | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and | Part XV | 7_ | Х | |
| 8 а | | | | | |
| - 4 | instructions) ► WA, | | | | |
| h | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney | General | | - 1 | |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | | 8ь | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4 | | | | |
| • | or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part | | | | |
| | page 27)? If "Yes," complete Part XIV | | 9 | | X |
| | remarkant transfer and the contract of the con | - | | 7 | |

JSA 8E1440 1 000

names and addresses . . .

Form **990-PF** (2008)

10

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008? | 4b | X | Form 990-PF (2008)

N/A

X.

3Ь

3a Did the foundation hold more than a 2% direct or indirect interest in any business

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

| | | | | | ▶ | NO | ONE |
|---|----|----|---|---|----|----|--------|
| - | Fo | rm | 9 | 9 | 0- | PF | (2008) |

| Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued) | yees, | |
|--|--------------|---------------|
| 3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, | enter "NC | ONE." |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Com | pensation |
| N/A | | |
| | <u> </u> | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | - |
| | | |
| Total number of others receiving over \$50,000 for professional services | | NONE |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Ехре | nses |
| 1 MADE UNRESTRICTED GRANTS IN SUPPORT OF EXEMPT ORGANIZATIONS | | |
| TO FUTHER THE FOUNDATION'S CHARITABLE PURPOSES IN SOCIAL | Ì | |
| SERVICE, EDUCATION, SCIENCE, AND RELIGION. | | 55,500. |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | <u> </u> | |
| 4 | 1 | |
| | j | |
| De-1VD Commence of Drawn Bollated Investments (see a 22 of the continuous) | Ĺ | |
| Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amo | nunt |
| | | |
| 1 NONE | | |
| | | |
| 2 | | |
| 4 | | |
| | | |
| All other program-related investments. See page 24 of the instructions | | |
| 3 NONE | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | |

| Pa | Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.) | gn foundations, | |
|--------|---|-------------------------|--------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | | |
| а | Average monthly fair market value of securities | 1a | 191,648. |
| b | Average of monthly cash balances | 1 b | 19,959. |
| C | Fair market value of all other assets (see page 24 of the instructions) | 1c | 159,795. |
| d | Total (add lines 1a, b, and c) | 1 d | 371,402. |
| е | | | |
| | 1c (attach detailed explanation) 1e | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | NONE |
| 3 | Subtract line 2 from line 1d | 3 | 371,402. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 | | |
| | of the instructions) | 4 | 5,571. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 365,831. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 18,292. |
| Pa | rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(J)(3) and (J)(5) private foundations and certain foreign organizations check here ▶ □ and do not complete this p | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 18,292. |
| | | | 10,232. |
| b | Income tax for 2008 (This does not include the tax from Part VI.) | | |
| c | | 2c | 2,057. |
| 3 | Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 16,235. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 10,2001 |
| _ | | 5 | 16,235. |
| 6 | Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions) | 6 | 20/200. |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| | line 1 | 7 | 16,235. |
| Pa | rt XII Qualifying Distributions (see page 25 of the instructions) | | 10,200. |
| | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| 1 | · · · · · · · · · · · · · · · · · · · | 1a | FF F00 |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1b | 55,500. |
| b | Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | 10 | NONE |
| 2 | | 2 | MOND |
| • | Amounts set aside for specific charitable projects that satisfy the | | NONE |
| 3 | South book (prior IBS opposed required) | 3a | MONE |
| a | Suitability test (prior IRS approval required) | 3b | NONE |
| b 4 | Cash distribution test (attach the required schedule) | 4 | NONE |
| 4 = | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | * | 55,500. |
| 5 | ' ' | E | |
| ^ | Enter 1% of Part I, line 27b (see page 26 of the instructions) | 5 N/ | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | | 55,500. |
| | qualifies for the section 4940(e) reduction of tax in those years | retrier the louridation | 1 |

| Pa | rt XIII Undistributed Income (see page | 26 of the instruction | ns) | | |
|----|--|-----------------------|----------------------------|-------------|-------------|
| | Distributable amount for 2008 from Part XI, | (a) Corpus | (b) Years prior to 2007 | (c) 2007 | (d) 2008 |
| 1 | | | | | 16,235. |
| | line 7 | | | | |
| 2 | · - | | | NONE | |
| | Enter amount for 2007 only | | | NONE. | |
| | | | | | |
| 3 | Excess distributions carryover, if any, to 2008 | | | | |
| | From 2003 | | | | |
| | From 2004 | | | | |
| | From 2005 | | | | |
| | From 2006 | | | | |
| | From 2007 146,758. | 250 (22 | | | |
| | Total of lines 3a through e | 258,632. | | | |
| 4 | Qualifying distributions for 2008 from Part XII, | | | | |
| | line 4 ▶ \$55,500. | | | NONE | |
| а | Applied to 2007, but not more than line 2a | | | NONE | |
| b | Applied to undistributed income of prior years (Election required - see page 26 of the instructions) | | | | |
| С | Treated as distributions out of corpus (Election required - see page 26 of the instructions) | | | | |
| ٦ | Applied to 2008 distributable amount | | | | 16,235. |
| | Remaining amount distributed out of corpus | 39,265. | | | |
| 5 | Excess distributions carryover applied to 2008 | | | | |
| 6 | (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 297 , 897. | | | |
| | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | | | |
| С | Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| | amount - see page 27 of the instructions | | | | |
| е | Undistributed income for 2007 Subtract line 4a from line 2a Taxable amount - see page | | | | |
| | 27 of the instructions | | | NONE | |
| f | Undistributed income for 2008 Subtract lines 4d and 5 from line 1 This amount must be | | | | |
| 7 | distributed in 2009 Amounts treated as distributions out of corpus to satisfy requirements imposed by section | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) | | | | |
| 8 | Excess distributions carryover from 2003 not applied on line 5 or line 7 (see page 27 of the instructions) | 27,442. | | | |
| 9 | Excess distributions carryover to 2009. | | | | |
| | Subtract lines 7 and 8 from line 6a | 270,455. | | | |
| 10 | Analysis of line 9 | | | | |
| | Excess from 2004 | | | | |
| | Excess from 2005 | | | | |
| С | | | | | |
| d | 146 750 | | | | |
| | Excess from 2008 | | | | |

| Р | art XIV Private Ope | rating Foundations | (see page 27 of th | è instructions and P | art VII-A, question 9) | NOT APPLICABLE |
|----------|---|---------------------------|---------------------------------------|-------------------------|--|--|
| 1 a | If the foundation has | received a ruling or | determination letter th | nat it is a private ope | erating | |
| | foundation, and the rulin | ig is effective for 2008, | enter the date of the rulin | g | ▶ | |
| b | Check box to indicate wh | nether the foundation is | a private operating four | | | (j)(3) or 4942(j)(5) |
| 2 0 | | Tax year | | Prior 3 years | | |
| 2 a | Enter the lesser of the ad- justed net income from Part | (a) 2008 | (b) 2007 | (c) 2006 | (d) 2005 | (e) Total |
| | I or the minimum investment | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | _ |
| | return from Part X for each year listed | | | | | |
| . | | | | | | |
| þ | 85% of line 2a | ··· | | <u> </u> | | |
| С | Qualifying distributions from Part | | | | | |
| d | XII, line 4 for each year listed . Amounts included in line 2c not | | | | | |
| _ | used directly for active conduct | | | | | |
| | of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of | | | | | |
| | exempt activities Subtract line | | | | | |
| | 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon | | | | | |
| а | "Assets" alternative test - enter | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying | | | | | |
| | under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test- | | | | | |
| | enter 2/3 of minimum invest- | | | | | |
| | ment return shown in Part X, line 6 for each year listed | | | | | |
| С | "Support" alternative test - enter | | | | | <u> </u> |
| | (1) Total support other than | | | | | |
| | gross investment income | | | | | |
| | (interest, dividends, rents, payments on securities | | | | | |
| | loans (section 512(a)(5)), | | | | | |
| | or royalties) | | | | | |
| | (2) Support from general public and 5 or more | | | | | |
| | exempt organizations as provided in section 4942 | | | | | |
| | (j)(3)(B)(III) | | | | | |
| | (3) Largest amount of sup- | | | | | |
| | port from an exempt organization | | | | | |
| | (4) Gross investment income. | | | | <u> </u> | |
| Pa | irt XV Supplement | ary Information (C | omplete this part | only if the foundati | on had \$5,000 or mo | ore in assets at any |
| | <u></u> | the year - see page | | ons.) | | |
| 1 | Information Regarding | - | | | | |
| а | List any managers of t | the foundation who h | nave contributed mor | re than 2% of the tota | al contributions received | ed by the foundation |
| | before the close of any | tax year (but only if the | ney have contributed | more than \$5,000). (S | see section 507(d)(2)) | |
| | NONE | | | | | |
| b | List any managers of | the foundation who | own 10% or more o | f the stock of a corp | oration (or an equally | large portion of the |
| | ownership of a partner | | | | | • |
| | NONE | | | - | | |
| | HONE | | | | | |
| 2 | Information Regarding | Contribution, Grant | . Gift. Loan. Scholars | hip, etc., Programs: | | |
| _ | Check here ► If th | • | • | • • • • | table organizations s | and does not accept |
| | unsolicited requests for | | | | | |
| | organizations under oth | | | | 20 01 010 110000 | may to mantiduals of |
| | | | <u></u> | | | |
| а | The name, address, ar | • | of the person to who | m applications should b | e addressed: | |
| | SEE STATEM | | | | | |
| b | The form in which appli | ications should be sul | omitted and informati | on and materials they | snould include | |
| | | | | | | |
| | SEE STATEM | | | | | |
| C | Any submission deadling | nes | | | | |
| | | | | | | |
| | NONE | | | | | |
| d | Any restrictions or lin | nitations on awards, | such as by geogra | aphical areas, charita | ble fields, kinds of | institutions, or other |
| | factors | | | | | |
| | SEE STATEM | ENT 8 | | | | |
| 164 | | | | | | |

| 3 Grants and Contributions Paid During | a the Vear or Appre | wed for F | uture Payment | |
|--|--|-------------|----------------------------------|-------------|
| Seconent Pacific And During | If recipient is an individual, | Foundation | Survey of survey | T |
| 3 Grants and Contributions Paid During Recipient Name and address (home or business) | show any relationship to any foundation manager | status of | Purpose of grant or contribution | Amount |
| a Paid during the year | or substantial contributor | | | |
| a rate daming the year | | | | |
| SEE STATEMENT 9 | | | | |
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| | | | | |
| Total | | | ▶ 3a | 55,500. |
| b Approved for future payment | | | | 33,300. |
| b Approved for fatare payment | | | | |
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| | | | <u> </u> | |
| Total | | | ▶ 3b | I |

| Part X\ | /I-A Analysis of Income-Produ | cing Acti | vities | | | |
|-----------------|--|---------------|---------------------------------------|--|-----------------------------------|---|
| Enter gros | ss amounts unless otherwise indicated | Unrel (a) | ated business income (b) | Excluded b | y section 512, 513, or 514 (d) | (e) Related or exempt function income |
| 1 Progra | am service revenue | Business code | | Exclusion code | | (See page 28 of the instructions) |
| a | | | | | | |
| ь ~ | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | <u> </u> | |
| f | | | | | | |
| g Fe | es and contracts from government agencies | | | | | |
| 2 Memb | ership dues and assessments | | | | | |
| 3 Interest | t on savings and temporary cash investments | | | 14 | 7,054. | |
| | nds and interest from securities | | | | | . <u>.</u> |
| 5 Net rea | ntal Income or (loss) from real estate | | | | | <u>.</u> |
| a De | ebt-financed property | | | | | - |
| b No | ot debt-financed property | | | | | |
| 6 Net ren | tal income or (loss) from personal property . | | | | | - |
| 7 Other | investment income | | | | | |
| 8 Gain or | (loss) from sales of assets other than inventory | | | 18 | 95,819. | |
| 9 Net inc | come or (loss) from special events | | | <u> </u> | | |
| 10 Gross | profit or (loss) from sales of inventory | | | | | |
| 11 Other r | revenue a | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| | al Add columns (b), (d), and (e) [| | | | 102,873. | |
| | Add line 12, columns (b), (d), and (e) | | | | 13 | 102,873. |
| | sheet in line 13 instructions on page 28 t | | | coment Decem | | - |
| Part XV | | | | | | |
| Line No. | Explain below how each activity the accomplishment of the fo | | | | | |
| ▼ | page 28 of the instructions) | undanon 3 | exempt purposes (c | Julier triair E | y providing failed for | Such purposes). (Se |
| | | | | | <u></u> | |
| | NOT AFFLICABLE | | | | | |
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| Forn | า 990-RF | - (2008) : | | | | 9 | 1-158549 | 3 | | | age 13 |
|-----------|--------------------------------|--|--|--|------------------------------|--------------------------------|---------------------------------|-------------------------------------|--|------------------------|-------------------|
| Pa | rt XVI | Information Exempt Orga | | ansfers To and | l 'Transa | ctions a | ind Relati | onships \ | With No | nchari | table |
| 1 a | 501(d | he organization directly c) of the Code (other than afers from the reporting f | section 501(c)(3) | organizations) or in se | ction 527, r | | | | section | Yes | No |
| | | Cash | | | | | | | | (1) | X X |
| b | Other | r transactions [.] | | | | | | | | | |
| | | ales of assets to a noncl furchases of assets from | | | | | | | | | X |
| | (3) R | lental of facilities, equipm | ent, or other assets | | | | | | 1b | (3) | X |
| | | eimbursement arrangeme oans or loan guarantees | | | | | | | | | X |
| | (6) P | erformance of services of | or membership or fu | ndraising solicitations | | | | | <u>1b</u> | (6) | <u>x</u> |
| d | | ng of facilities, equipmer answer to any of the at | | | | | | | | c le of the | X goods, |
| | other | assets, or services giver | by the reporting | foundation If the for | undation re | ceived less | | | | | |
| (a) | Line no | (b) Amount involved | (c) Name of no | ncharitable exempt organ | nization | (d) Desc | ription of transf | ers, transactions | s, and shanng | arrangeme | ents |
| | | N/A | | | - | N/A | · | | | | |
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| | sectio | e foundation directly or on 501(c) of the Code (oth s," complete the following | er than section 50 | | | nore tax-ex | empt organi | ations descri | bed in | Yes 🔀 | √ Nο |
| | | (a) Name of organization | | (b) Type of org | ganization | | | c) Description | of relationship | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | Under belief, | penalties of perjury, I declarit is true, correct, and comp | are that I have examplete Declaration of | ined this return, including oreparer (other than tax | ng accompai payer or fidu | nying schedu ciary) is basi | iles and statemed on all inform | nents, and to to nation of which | he best of m | y knowled s any kno | ige and wiedge |
| | X | Sun L | Ems | | | 4/19/ | 110 | KDIV. | ectn | | |
| ere | Sı | gnature of officer or trustee | | 0 - | Date | Date | | Title | eparer's ide | ntifying n | umber |
| Sign Here | Paid Preparer's Use Only | Preparer's signature | all L | mus 5 | APR | 4 2010 | Check if self-employe | ed ▶ | ee Signature of structions) 00937936 | on page 3 | |
| | Pa Prepi Use (| Firm's name (or yours if | BADER M | | 0.45 | | | EIN ▶ 91- | 1501421 | | |
| | - | self-employed), address, and ZIP code | 1000 SE SEATTLE | COND AVENUE, WA | 34TH F | | 04-1022 | Phone no. 2 | 206-621- | ·190 <u>0</u> | |

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| C. | <u>APITAL GA</u> | <u>INS AND LO</u> | SSES FO | R TAX ON | INVESTI | М | ENT INCOM | IE |
|--------------------------------|-----------------------|------------------------------|-------------------|-------------------|--------------------|--------------|------------------|------------|
| Kınd of | Property | | Desc | ription | | P or D | Date acquired | Date sold |
| Gross sale | Depreciation | Cost or | FMV | Adj. basis | Excess of | Ń | Gain | |
| price less expenses of sale | allowed/ allowable | other | as of 12/31/69 | as of 12/31/69 | FMV over adj basis | | or (loss) | |
| expenses of sale | ı ailowable | basis | 12/31/09 | 1 12/31/09 | auj pasis | | (IOSS) | |
| | | 400,000 SH. PROPERTY TYPE | | TES | | P | 04/09/2008 | 04/30/2008 |
| ,711,614. | | 4,807,765. | | | | | -96,151. | |
| | | 50,000 SH. T | | IES | | Р | VARIOUS | 05/22/2008 |
| ,712,591. | | 2,549,815. | | | | | 162,776. | |
| | | ZERO NET PROPERTY TYPE | PE: SECURIT | IES | | P | VARIOUS | 07/18/2008 |
| 29,194. | | NONE | | | | | 29,194. | |
| | | | | | | | | |
| TOTAL GAIN(L | oss) | | | | • • • • • • • | | 95,819. | |
| | | | | | | | | |
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JSA 8E1730 1 000

| NET INVESTMENT INCOME | 7,054. | |
|---|-----------------------|--|
| REVENUE AND EXPENSES PER BOOKS | 7,054. | |
| | TOTAL | |
| DESCRIPTION | OTHER INTEREST INCOME | |

.

N

FORM 990PF, PART I - OTHER EXPENSES

| REVENUE | AND | EXPENSES | PER BOOKS | 1 1 1 1 1 1 | 4 |
|---------|-----|----------|-------------|-------------|--------------|
| | | | DESCRIPTION | | BANKING FEES |

ι i

45. 45.

TOTALS

45.

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- PREPAID EXPENSES AND DEFERRED CHARGES FORM 990PF, PART II

1

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| ENDING | FMV | ! | 5,875. | 5,875. | |
|--------|-------------|---|-------------|--------|--|
| ENDING | BOOK VALUE | | 5,875. | 5,875. | |
| | | | | TOTALS | |
| | DESCRIPTION | | PREPAID TAX | | |

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FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

ONVANTAGE

| ENDING | BOOK VALUE | |
|--------|------------|--|

つんたつのつて エン

ENDING FMV ---36,677.

36,677.

36,677.

TOTALS

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

| NAME AND ADDRESS | TITLE AND TIME TO EMPLOYEE AND OTHER DEVOTED TO POSITION COMPENSATION BENEFIT PLANS ALLOWANCES | COMPENSATION | CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES | EXPENSE ACCT AND OTHER ALLOWANCES |
|---|---|--------------|---|---|
| ANN L. EVANS 2269 CHESTNUT STREET, SUITE 338 SAN FRANCISCO, CA 94123-2600 | PRESIDENT 1 | NONE | NONE | NONE |
| CRAIG STERNBERG 500 UNION STREET, SUITE 500 SEATTLE, WA 98104 | SEC/TREAS 1 | NONE | NONE | NONE |

STATEMENT 5

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

ANN L. EVANS 2269 CHESTNUT STREET, SUITE 338 SAN FRANCISCO, CA 94123-2600 425-222-3520

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

APPLICATIONS MUST BE SUBMITTED IN WRITING AND MUST INCLUDE A DESCRIPTION OF THE PROGRAM OR PROJECT FOR WHICH AN AWARD IS REQUESTED.

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS **********************************

GIFTS ARE MADE TO ORGANIZATIONS EXEMPT FROM TAX UNDER IRC SEC. 501(3)(C); ALSO TO STATE AND LOCAL INSTITUTIONS DESCRIBED IN IRC 170(C)(1).

24

:

AMOUNT

10,000.

STATEMENT 9

1,000.

TO PROVIDE SUPPORT TO EXEMPT ORGANIZATION

NONE EXEMPT

345 BOYER AVENUE WALLA WALLA, WA 99362

WHITMAN COLLEGE

10,000.

| | PURPOSE OF GRANT OR CONTRIBUTION | TO PROVIDE SUPPORT TO EXEMPT ORGANIZATION | TO PROVIDE SUPPORT TO EXEMPT ORGANIZATION | PO DEGITIES CHEBOON TO TAKEN AND AND AND AND AND AND AND AND AND AN | 10 FNOVIDE SUFFORI 10 EASHEL ONGANIZALLON | TO PROVIDE SUPPORT TO EXEMPT ORGANIZATION | TO PROVIDE SUPPORT TO EXEMPT ORGANIZATION | TO PROVIDE SUPPORT TO EXEMPT ORGANIZATION |
|---|----------------------------------|---|---|---|--|--|---|--|
| RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND | FOUNDATION STATUS OF RECIPIENT | NONE | NONE | EXEMPT | EXEMPT | NONE EXEMPT | NONE EXEMPT | NONE EXEMPT |
| | RECIPIENT NAME AND ADDRESS | BLAIR ACADEMY 2 PARK ST. | BLAIRSTOWN, NJ 07825 INTERLOCHEN CENTER FOR THE ARTS | 4000 HIGHWAY M-137 INTERLOCHEN, MI 49643 LAMA PONSOCK | 4610 EARLES ST. V5R 3R2 VANCOLVER CBC CANADA | MATSURI - CANADA 900-1175 DOUGLAS ST. VBW 2E1 VICTORIA BC | CANADA O'HANA FOUNDATION PO BOX 5227 KAILUA-KONA, HI 96745 | STANFORD UNIVERSITY 326 GALVEZ STREET STANFORD, CA 94305 |

·

25,000.

3,000.

5,000.

1,500.

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

55,500.

TOTAL CONTRIBUTIONS PAID

56

2CD0HJ K378 03/13/2010 19:08:07 V08-8.3 21592/WRS

UC 40001-10

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

2008

91-1585493 SEVEN WOODS FOUNDATION Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (see page 4 of the instructions) the entire year (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) Subtract (e) from (d) 1 a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1 b 95,819. 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2007 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, 95,819 column (3) on the back. Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (see page 4 of the the entire year (d) Sales price (mo, day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 6 a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6 b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 Capital gain distributions Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, Schedule D (Form 1041) 2008 For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

| Schee | dule D (Form 1041) 2008 | | | | Page 2 |
|---------------|--|---------------------|---|--|--------------------------------------|
| Pai | Summary of Parts I and II Caution: Read the instructions before completing this pa | art. | (1) Beneficiaries' (see page 5) | (2) Estate's or trust's | (3) Total |
| 13 | Net short-term gain or (loss) | 13 | | | 95,819. |
| 14 | | | | | |
| а | Total for year | 14a | | | |
| þ | Unrecaptured section 1250 gain (see line 18 of the wrksht.) | 14b | | | |
| C | 28% rate gain | 14c | | | |
| 15 | Total net gain or (loss). Combine lines 13 and 14a ▶ | 15 | | | 95,819. |
| Note to Pa | e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fort V, and do not complete Part IV. If line 15, column (3), is a net loss, complete F | rm 990 Part IV a | -T, Part I, line 4a). If line and the Capital Loss Car | s 14a and 15, column ryover Worksheet, as | (2), are net gains, go necessary. |
| Par | t IV Capital Loss Limitation | | · · · · · · · · · · · · · · · · · · · | | |
| | Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, I | | | | |
| a | The loss on line 15, column (3) or b \$3,000: | . : : | | 16 (|) |
| Note Canv | : If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag over Worksheet on page 7 of the instructions to figure your capital loss carryove | je 1, lin er | e 22 (or Form 990-1, li | ne 34), is a loss, com | piete the Capital Loss |
| | Tax Computation Using Maximum Capital Gains Rates | | | | |
| | 1 1041 filers. Complete this part only if both lines 14a and 15 in colu | ımn (2 |) are gains, or an am | ount is entered in | Part I or Part II and |
| | is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo | | | | |
| | ion: Skip this part and complete the worksheet on page 8 of the instru | ctions . | if. | | |
| | ther line 14b, col (2) or line 14c, col (2) is more than zero, or | | | | |
| | oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero | : | مانيات ما الاقتاما | da ara inaludad i | n incomo in Part I |
| | n 990-T trusts. Complete this part only if both lines 14a and 15 ar orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa | | | | |
| | r line 14b, col (2) or line 14c, col (2) is more than zero | iii ana | complete the work | moor on page o o. | mondonom m |
| 17 | Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3 | 841 | 17 | | |
| 18 | Enter the smaller of line 14a or 15 in column (2) | , , , , | · · ' | | |
| , 0 | but not less than zero | | | | |
| 19 | Enter the estate's or trust's qualified dividends | | - | | |
| | from Form 1041, line 2b(2) (or enter the qualified | | | | |
| | dividends included in income in Part I of Form 990-T) . 19 | | | | |
| 20 | Add lines 18 and 19 | | | | |
| 21 | If the estate or trust is filing Form 4952, enter the | | | | |
| | amount from line 4g, otherwise, enter -0- ▶ 21 | | | | |
| 22 | Subtract line 21 from line 20 If zero or less, enter -0 | | 22 | | |
| 23 | Subtract line 22 from line 17 If zero or less, enter -0- | | 23 | | |
| | | | | | |
| 24 | Enter the smaller of the amount on line 17 or \$2,200 | | 24 | | |
| 25 | Is the amount on line 23 equal to or more than the amount on line 24 | 1? | | | |
| | Yes. Skip lines 25 and 26, go to line 27 and check the "No" box | [| | | |
| | No. Enter the amount from line 23 | | 25 | | |
| 26 | Subtract line 25 from line 24 | | 26 | | |
| 27 | Are the amounts on lines 22 and 26 the same? | | 1 1 | | |
| | Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line | ne 22 | 27 | | |
| •• | Fig. 11 - 14 - 15 - 15 - 20 (15 by a 20 or blank and a 20 or | | | | |
| 28 | Enter the amount from line 26 (If line 26 is blank, enter -0-) | | 28 | | |
| 29 | Subtract line 28 from line 27 | | 29 | } } | |
| 30 | Multiply line 29 by 15% (15) | | | 30 | |
| 31 | Figure the tax on the amount on line 23 Use the 2008 Tax Rate So | chedul | e for Estates and Tru | · · · · | |
| | the Schedule Ginstructions) | | | | |
| | the deficación of modulostorio, | | | | |
| 3 2 | Add lines 30 and 31 | | | 32 | |
| 33 | Figure the tax on the amount on line 17 Use the 2008 Tax Rate So | hedul | e for Estates and Tru | ısts (see | |
| | the Schedule Ginstructions) | | | | |
| 34 | Tax on all taxable income. Enter the smaller of line 32 or I | ine 3 | 3 here and on line | e 1a of | |
| | Schedule G, Form 1041 (or line 36 of Form 990-T) | | | f f | |

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D

(Form 1041)
▶ See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. OMB No 1545-0092

2008

Department of the Treasury Internal Revenue Service Name of estate or trust

Employer identification number

| | | | 1 | Employer identification | | | | | |
|---|---|----------------------------------|---|--|---|--|--|--|--|
| SEVEN WOODS FOUNDATION | | | | 91-1585493 | | | | | |
| Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less | | | | | | | | | |
| (a) Description of property (Example 100 sh 7% preferred of "Z" Co) | (b) Date acquired (mo , day, yr) | (c) Date sold (mo , day, yr) | (d) Sales pnce (see page 4 of the instructions) | (e) Cost or other basis (see page 4 of the instructions) | (f) Gain or (loss) Subtract (e) from (d) | | | | |
| 1a | | | | | | | | | |
| 400,000 SH. KKR FINL | 04/09/2008 | 04/30/2008 | 4,711,614. | 4,807,765. | -96,151. | | | | |
| 50,000 SH. TBS INTL | VARIOUS | 05/22/2008 | 2,712,591. | 2,549,815. | 162,776. | | | | |
| ZERO_NET | VARIOUS | 07/18/2008 | 29,194. | NONE | 29,194. | | | | |
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| | | | | | | | | | |

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b. For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

95,819. Schedule D-1 (Form 1041) 2008

Form **8868**

(Rev April 2008)

Application for Extension of Time To File an Exempt Organization Return

| ONE | A 1 - | 45.6 | |
|-----|-------|------|------------|
| OMB | NΩ | 1545 | . 1 7/1) (|

| — mal Revenue € | • | | > | File a separat | e application for ea | ach return | | | | |
|--|--|---|---|--|--|---|-------------------|---|---------------------------------------|---|
| | | n Automatic 3 | | | ete only Part I a | | box | | | ▶ x |
| • If you are | filing for a | n Additional (N | lot Automati | ic) 3-Month E | xtension, comp automatic 3-m | olete only Part | : II (on pag | | | |
| Part I Auto | omatic 3 | Month Exter | sion of Tim | ne. Only subr | nit original (no | copies need | led). | | | |
| A corporation Part I only · · | required | to file Form 99 | 0-T and requ | esting an aut | omatic 6-month | extension - cl | heck this I | oox and co | omplete | ▶ [|
| All other corpo | | | -C filers), par | tnerships, RE | MCs, and trusts | musit us e for | | xeguest a | n extensioi | n of |
| Electronic Fili | ina <i>(e-file</i>) | . Generally, vo | u can electr | onically file F | orm 8868 if yo | ou want a 3-r | north aut | omatic e | xtension o | f time to file |
| one of the re electronically returns, or a c | eturns not if (1) you composite | ed below (6 r want the add or consolidate | months for a litional (not a ed From 990- | a corporation automatic) 3-r T Instead, yo | required to file month extension ou must submit www.irs.gov/efile | e Form 990-T n or (2) you f the fully com |) Howeville Forms | re // you o 990-BL, d signed p | cannot file 6069, or page 2 (Pa | Form 8868 8870, group art II) of Form |
| Type or | Name of | Exempt Organiz | ation | | | | | Employe | er identifica | tion number |
| print | SEV | ZEN WOODS | FOUNDATIO |)N | | | | 91 | 1585493 | |
| | | street, and room | | | ınstructions | | | | 1000475 | |
| File by the due date for | | 212 BOTHEL | | | | | | | | |
| filing your return See | | | | | eign address, see i | nstructions | | | | |
| instructions | • | LL CREEK, | | | • | | | | | |
| Check type o | | o be filed (file a | | nnlication for e | each return) | • | | | | |
| Form 990 | | o be mea (me e | | 90-T (corporatio | • | | ☐ E0 | m 4720 | | |
| Form 990 | - | | | | a) or 408(a) trust) | | | m 5227 | | |
| Form 990 | | | — 1 | 90-T (sec 401) | | | | m 6069 | | |
| X Form 990 | | | Form 10 | • | than above) | | <u> </u> | m 8870 | | |
| <u> </u> |)-r r | | | | | | | 111 0070 | | |
| If this is for or the whole grames and Elli | r a Group l group, che Ns of all m | Return, enter the ck this box nembers the example at the control of the control | ne organization If it | on's four digit is for part of over a corporation | s in the United Group Exemption the group, check required to file | on Number (GEck this box Form 990-T) e | extension | of time | h a list wit | |
| until for the org | - | 's return for: | · | tne exempt or | ganizatıon retur | rn for the orga | nization n | amed ab | ove The ex | ktension is |
| ► <u>X</u> | | year <u>2008</u> c | or . | | | | | | | |
| > | tax year | beginning | | | , and er | nding | | | · —— | • |
| 2 If this tax | year is fo | r less than 12 | months, chea | resson: | Initial return | Final r | eturn | Change | e in accour | nting period |
| · | - | s for Form 99 | | ₹ 99 ((T, 4 1/2 | 07)66 69, e | nter the tenta | itive tax, | less any | | |
| | | lits. See instruc | | | 19 | | | | 3a \$ | NONE |
| | | | | • | efundab) credi | its and estima | ited tax p | ayments | | |
| | | orior year over | | | | | | | 3b \$ | NONE |
| | coupon | | | | eayment with the ectronic Federa | | | - | 2.0 | NONE |
| | | to make == -1 | natronia fire | l vanih denominal : | oth this Esser Of | 060 665 555 | 0452 50 |) osd 5: :: | 3c \$ | NONE |
| payment ins | | to make an el | ectionic fund | ı williüləwəl W | vith this Form 88 | ooo, see Form | 1 0433-E(| anu Fon | oo/9-EC | , |
| | | erwork Reduc | tion Act Not | tice, see Instru | uctions. | | | | Form 8868 | Rev 4-2008) |
| | | | | | | | | 1 | | , |
| | | | | | | | | /V/ | , | |

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| Form 8868 | (Rev 4-2008) | • | | | | Page 2 |
|------------------------|---------------------------------------|--|------------------------------|-----------------------|--|---------------|
| | | Not Automatic) 3-Month Extension, o | ompiete only Part II a | nd check this box | (| |
| | | ave already been granted an automatic | | | | |
| | • | -Month Extension, complete only Pa | | , , | | |
| Tt II | | matic) 3-Month Extension of T | | original and c | ne copy. | |
| | ication numbe | r | | | | |
| Type or print | SEVEN WOODS FO | 91-158549 | 3 | | | |
| File by the | Number, street, and room | For IRS use only | | | | |
| extended due date f | n 16212 BOTHELL | | | | | |
| filing the return Sec | City, town or post office, | tate, and ZIP code. For a foreign address, se | e instructions | | | |
| instruction | | 98012 | | | | |
| Check t | ype of return to be filed (Fi | e a separate application for each return | | | | |
| F | orm 990 | <u>r</u> Form 990-PF | ((5) | -Eorm 1041-A | —————————————————————————————————————— | m 6069 |
| F | orm 990-BL | Form 990-T (sec 401(a) or 408(a |) trust) | Pgrm 4720 | Fori | m 8870 |
| | orm 990-EZ | Form 990-T (trust other than above | | £656005327 | | |
| STOP! | Do not complete Part II if y | ou were not already granted an auto | matic 3-month exter | sion on a previo | usly filed Fo | orm 8868. |
| • The b | ooks are in the care of 🕨 | ANN EVANS | | <u> </u> | | |
| | hone No ▶ <u>425 398-</u> | | lo ▶ <u>425 398-8</u> | | | |
| | | an office or place of business in the Ui | | | | ▶∟ |
| | | the orga <u>niza</u> tion's four digit Group Exe | | | this is | |
| | • | ▶ 🔛 If it is for part of the grou | p, check this box | . ▶ and attac | ch a | |
| list with | the names and EINs of all r | embers the extension is for | | | | |
| | • | extension of time until $11/15/20$ | | | _ | |
| | r calendar year <u>2008</u> , or | | and end | | | |
| | his tax year is for less than | | | | e in account | ing period |
| | | e extension <u>ALL THE INFORMAT</u> | | | | |
| | | LETE AND ACCURATE RETURN | | | | |
| <u>AV</u> | AILABLE, PRECLUDING | THE FILING OF THE RETURN | BY THE DUE DAT | <u>'E.</u> | ···· | |
| | | 000 DI 000 DE 000 T 4700 | 00 - 11 - 11 - 1 - 1 - 1 - 1 | | | |
| | • • | 990-BL, 990-PF, 990-T, 4720, or 606 | 9, enter the tentative | tax, less any | | |
| | nrefundable credits See ins | | | | 8a \$ | NONE |
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| | eviously with Form 8868 | from the Se Include your never net | th this form or if ros | uurod donosit | 4 GO | NONE |
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| Ins | tructions | Signature and \ | /orification | | 10014 | NONE |
| Under nen | alties of nerrory I declare that I i | ave examined this form, including accompanyi | | ts, and to the best o | f mv knowleda | e and belief. |
| it is true, co | orrect, and complete, and that I am a | uthorized to prepare this form | | , | , | |
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| Signature | MATTER | Tutle | · CPA | Date | 8/6/0 | 9 |
| Olghatule | BADER MARTIN, P. | 11 2 | | | Form 8868 (1 | Rev 4-2008) |
| | 1000 SECOND AVEN | | | | • | · |
| | SEATTLE, WA 9810 | | | | | |
| | Jan 122, 111 3010 | · · · · · · · · · · · · · · · · · · · | | | | |



Form 8868

Application for Extension of Time To File an anization Return

| ~ . | - | | 4-4-4 | |
|-----|-----|-----|--------|-----|
| ON | IB. | NO. | 1545-1 | 709 |

| (Rev April 2008) | Exempt | Org |
|----------------------------|---------|-----|
| Pepartment of the Treasury | <u></u> | |

File a separate application for each return mai Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMCs, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want (3) month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form \$90-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated From 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Employer identification number Name of Exempt Organization Type or print **8**1-1585493 SEVEN WOODS FOUNDATION Number, street, and room or suite no. If a P O. box, see instructions File by the due date for 16212 BOTHELL EVERETT HWY filing your City, town or post office, state, and ZIP code For a foreign address, see instructions return. See instructions MILL CREEK, WA 98012 Check type of return to be filed (file a separate application for each return) Form 4720 Form 990 Form 990-T (corporation) Form 5227 Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 The books are in the care of ► ANN EVANS Telephone No ▶ 425 398-8988 FAX No. ▶ 425 398-8988 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is If it is for part of the group, check this box for the whole group, check this box and attach a list with the names and EINs of all members the extension will cover I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time to file the exempt organization return for the organization named above. The extension is 11/15 2009 for the organization's return for calendar year 2008 tax year beginning If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions NONE If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 3b \$ NONE Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions NONE Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO payment instructions. or Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev 4-2008)